

Accounts Clerk

Duties include receiving and processing revenue payments and responding to taxpayer inquiries.

Position requires a high school diploma or equivalent supplemented by business courses, plus one to two years of progressively responsible clerical experience including public contact. Current Salary is \$31,618.

See below for job description and Employment Application.

Completed applications must be returned to the East Hartford Human Resources Department by 4:30 p.m. Friday, November 8, 2013.

The Town of East Hartford is a Equal Opportunity Employer.

PLEASE DO NOT FAX COMPLETED APPLICATION

TOWN OF EAST HARTFORD

TITLE: Accounts Clerk GRADE: 3

DEPARTMENT: Tax DATE: 6/07/2005

GENERAL DESCRIPTION

This is responsible counter and telephone public service work involving the collection of municipal revenues.

Work involves responsibility for effectively and courteously dealing with the taxpaying public. Duties include receiving and processing revenue payments and responding to taxpayer inquiries. This position also has the responsibility for making basic revenue collection clerical decisions. The work requires that the employee have general familiarity with tax collection procedures and good knowledge, skill and ability with data entry, basic mathematics and dealing with the public.

SUPERVISION RECEIVED

Works under the general supervision of the Collector of Revenue and Assistant Collector of Revenue.

SUPERVISION EXERCISED

None.

ESSENTIAL DUTIES AND RESPONSIBILITIES

- Renders service and assistance to parties at the payment counter of the Tax Department.
- Receives payments for taxes and for parking tickets.
- Processes cash, credit card and check payments. Makes necessary change and receipts tax bills.
- Balances cash drawer and makes daily deposit of revenues.
- Responds to questions regarding tax payments, mill rates, interest charges and Town parking ordinances.
- Answers telephone, directs callers, takes messages or answers routine procedural questions.

KNOWLEDGE, SKILLS, AND ABILITIES

- Good knowledge of general office procedures, including the use of personal computer and software.
- Good knowledge of tax collection procedures.
- Good knowledge of the operations of standard office machines, including a word processor, typewriter and calculator.
- Good knowledge of business English.
- Good skill in word processing skills.
- Good ability in oral and written communications.
- Good ability to follow oral and written instructions.
- Good ability to perform administrative procedures.
- Good ability to learn the operations of the assigned department.
- Very good ability to establish and maintain effective working relationships with supervisors, coworkers and tax and revenue paying public.

QUALIFICATIONS

A high school diploma or the equivalent, supplemented by business courses, plus one to two years of progressively responsible clerical experience including public contact, or an equivalent combination of education and experience which provides a demonstrated ability to perform the duties of the position.

SPECIAL REQUIREMENTS

None.

TOOLS AND EQUIPMENT USED

Computer, calculator, typewriter, fax equipment, copy machine, telephone, and credit card machine.

PHYSICAL AND MENTAL DEMANDS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The employee is frequently required to sit, talk and listen. Occasionally the employee is required to walk, use hands and fingers to operate office equipment and reach with hands and arms. The employee must occasionally lift or move up to 10 pounds. Specific vision abilities required for this job include close vision and the ability to adjust focus. Must be able to read and comprehend standard instructions, write straightforward correspondence and effectively present information in one-on-one situations. The position requires the ability to apply common sense understanding in carrying out instructions and deal with standardized situations involving occasional or no variables.

WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of the job, the employee will occasionally deal with clients who are mentally disturbed, substance abusers, hostile, terminally ill, or socially deviant. The noise level in the work environment is moderately quiet.

GENERAL GUIDELINES

The duties listed above are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related or a logical assignment to the position.

The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.



TOWN OF EAST HARTFORD

Phone (860) 291-7221

740 Main Street
East Hartford, Connecticut 06108
www.easthartfordct.gov

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

TELEPHONE NUMBER (HOME) TELEPHONE NUMBER Work () Cell () POSITION APPLIED FOR ARE YOU AT LEAST 18 YEARS OLD? YES NO ARE YOU ELIGIBLE TO WORK IN THE UNITED YES NO AVAILABILITY FULL-TIME PART-TIME DATE AVAILABLE FOR WORK EDUCATION Did you graduate from high school? Yes No If "No", highest grade completed:	O STATES?		
Work () Cell () POSITION APPLIED FOR ARE YOU AT LEAST 18 YEARS OLD? YES NO ARE YOU ELIGIBLE TO WORK IN THE UNITED YES NO AVAILABILITY FULL-TIME PART-TIME DATE AVAILABLE FOR WORK EDUCATION Did you graduate from high school? Yes No If "No", highest grade completed:) STATES?		
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Did you graduate from high school?	vannassa varga majara galajajanda kalenderi sebenjen di Albanderi sebenjen di Albanderi sebenjen di Albanderi		
Do you have a high paheal equivalency	A CALL CONTRACTOR		
Name of high school: Certificate Yes No	Do you have a high school equivalency Certificate ☐ Yes ☐ No		
Address: Place HS equivalency was granted:	Place HS equivalency was granted:		
List all colleges, business schools or technical schools you attended in chronological order, most recent listed first	.:		
School Address Course/Major Degree/	Certificate		
List any licenses or certificates required for the position for which you are applying (e.g., CDL, nursing, engineering), including date of issue, issuing authority, expiration date and license/certificate number.	Wilder State of the State of th		
List any special courses, training programs or other training that is relevant to the position for which you applying, including name and location where training was given, certificate received, if any, dates atten subject of training, number of hours weekly (attach additional sheet if necessary).	u are .ded,		
List any office equipment or machinery you can operate that is relevant to the position for which you are	e applying.		
RECRUITING INFORMATION Newspaper Community Agency Please give name:			
How did you hear about this job? (Please check one) Town Employee Name			
Referral Service Other Please give name:			

List below, chronologically (most recent dates first) each place you were employed, omitting none (attach additional sheet(s) if necessary). Give correct, full addresses, and dates of non-employment in proper sequence. Include all part-time employment.

YOU MUST COMPLETE THIS SECTION EVEN IF YOU ARE ATTACHING A RESUME

Name of Employer		Job Title		
Address	City		State	Zip Code
Dates of Employment:	Name and Title of Supe	rvisor	Telephor	ne Number
From / year To / month year	Description of duties, responsibilities, and significant accomplishments:			
Salary:				,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Starting \$ per				
Ending \$ per				
# Hrs. Worked Weekly	Reason For Leaving			
Name of Employer		Job Title		
Address	City		State	Zip Code
Dates of Employment:	Name and Title of Super	rvisor	Telephon	e Number
From / year Fo month year Salary:	Description of duties, re	esponsibilities, a	and significant acco	omplishments:
Starting \$ per Ending \$ per				
Hrs. Worked Weekly	Reason For Leaving			
lame of Employer		Job Title		
Address	City		State	Zip Code
ates of Employment:	Name and Title of Super	visor	Telephon	e Number
rom / year o month year month year	Description of duties, re	sponsibilities, a	nd significant acco	mplishments:
alary:				
tarting \$ per				
nding \$ per				
Hrs. Worked Weekly	Reason For Leaving			
ve you ever been discharge			☐ YES	□ NO



CERTIFICATION (READ CAREFULLY)

I hereby certify that the information I have provided on this application, including any attachments, is true and complete. I understand that if I falsify, omit or misrepresent any information on this application, or during an employment interview, should I be granted one, I may be disqualified from the selection process or discharged from employment, whenever the falsification or omission is discovered.

I understand that all statements made on this application are subject to verification. I authorize all persons or organizations listed on this application, except my current employer if noted above, to provide the Town with any and all information they may have concerning my previous employment, personal history, education and any other subjects covered by this application, and hereby release them, the Town, and the Town's current and former agents and employees from liability for any harm resulting from the disclosure of such information.

I understand that this application is <u>not</u> an employment contract, job offer or guarantee of employment. I further understand that if I receive a job offer, it is conditioned on my satisfactory completion of a criminal history check, drug test, medical examination and any other conditions listed in the job offer letter.

Signed	Date	



Name: Position Applied For					
	ow three individuals who can describe your qualifications for this sors, professors, colleagues, etc.				
Name:					
Job Title:					
Name of Work Place:					
Phone:					
Name:					
Address:					
Job Title:					
Name of Work Place:					
Phone:					
Name:					
Address:					
Name of Work Place:					
Phone:					

TOWN OF EAST HARTFORD CRIMINAL CONVICTION INFORMATION

You are required to list <u>any</u> criminal conviction, regardless of the nature, date or location of the conviction, <u>except</u> for minor traffic offenses or a conviction that has been erased under Connecticut law. Attach additional sheets of necessary.

The types of criminal records subject to erasure under Connecticut law are: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which you were found not guilty; and (e) a conviction for which you received a full pardon. If your only criminal record consists of items that have been erased under Connecticut law, then you are deemed never to have been arrested with respect to the erased proceeding and may swear so under oath.

This information will be made available only to the members of the Human Resources Department and to those persons interviewing the candidate.

A criminal conviction will not necessarily disqualify you from the application process, but will be considered as it relates to the position you are seeking and in light of any applicable state or federal law.

Date of Conviction	Offense	Location of Conviction (City and State)	Sentence	Date Sentence Completed

The information provided above is su	ubject to all of the terms and conditions set forth in the certification
on page 3 of the employment applica	·
Name (Print)	Position You Are Seeking
Applicant's Signature	Date

AUTHORIZATION & RELEASE

(GENERAL EMPLOYMENT)

DISCLOSURE NOTICE TO JOB APPLICANTS

Town of East Hartford Department of Human Resources 740 Main Street East Hartford, CT 06108 (860) 291-7221 In connection with your employment application, a consumer report, and/or an investigative consumer report including information with respect to your credit history, criminal convictions, motor vehicle violations, employment history, education, character, general reputation, and personal characteristics, whichever are applicable, may be made. You have the right within a reasonable period of time after receipt of this notice to make a written request for additional information as to the nature and scope of the investigation and a written summary of your rights under the Fair Credit Reporting Act. Such requests should be mailed to the address above.

In consideration of the Town of East Hartford's acceptance of my application to be considered for employment with the Town, I hereby voluntarily authorize the Town of East Hartford and its officers, officials, employees and agents to conduct a personality survey and to investigate my past employment history and activity, educational background, financial records, medical records, military records, criminal records, motor vehicle records, background investigation records, or whatever confidential or privileged information necessary to complete this investigation of my suitability to become an employee of the Town.

I hereby agree to cooperate in such investigation and acknowledge receipt of the above Disclosure Notice. I understand and agree that the Town may use copies of this Release to obtain information about me from whatever sources it deems necessary to interview, and expressly authorize such sources to provide assistance to me and the Town in my efforts to be employed by the Town of East Hartford. I also request that sources contacted by the Town accept a photocopy of this Release in lieu of an original, and hereby release and agree to indemnify and hold harmless any and all persons, including corporations and other business entities who may assist the Town in its efforts to determine whether or not I am a suitable candidate for employment.

I hereby acknowledge that I have read and fully understand the contents of this document and have freely signed same. I also agree that, if hired, this authorization shall remain on file and shall serve as an ongoing instrument for the Town of East Hartford to procure investigation reports at any time during my employment period.

This form must be notariz	ed or witnessed by Ek	IHRD in order to be conside	ered for emplo	yment
Signature:		Date Signed:		
Print Name:	···	Social Security No.: _	*	
Address:		State:	Zip Code:	
Subscribed and Sworn to I	pefore me, a Notary P	ublic, in and for County of		
and State of	, tnis	day of	, 20	
Notary Public /or		My Commission Expires:		
Witness -East Hartford Hur	nan Resource Dept.		Revised	02/08